

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	CT		6-9-00
O.I.P.E. CLASSIFIER		12)	6/16
FORMALITY REVIEW	11A	3640	5/16/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

APPLI
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TITLE APPLICANTS

Claim	Final	Original	Date
1	✓	✓	✓
2	✓	✓	✓
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
6	✓	✓	✓
7	✓	✓	✓
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Claim	Final	Original	Date
51	✓	✓	✓
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Claim	Final	Original	Date
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Form PTO-434
 (Rev. 6/99)

If more than 150 claims or 10 actions
 staple additional sheet here

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